

Navy Medicine

Spring 2010

Official Magazine of U.S. Navy Medicine

DESTINATION: **HAITI**

Saving Lives
And Providing
Hope In Haiti





Charter

NAVY MEDICINE is the professional magazine of the Navy Medical Department community. Its purpose is to educate its readers on Navy Medicine missions and programs. This magazine will also draw upon the medical department's rich historical legacy to instill a sense of pride and professionalism among the Navy Medical Department community and to enhance reader awareness of the increasing relevance of Navy Medicine in and for our nation's defense.

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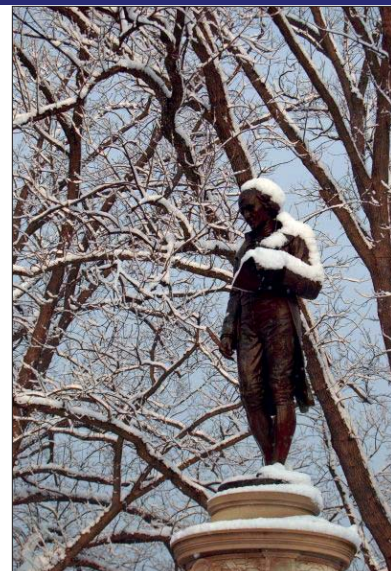
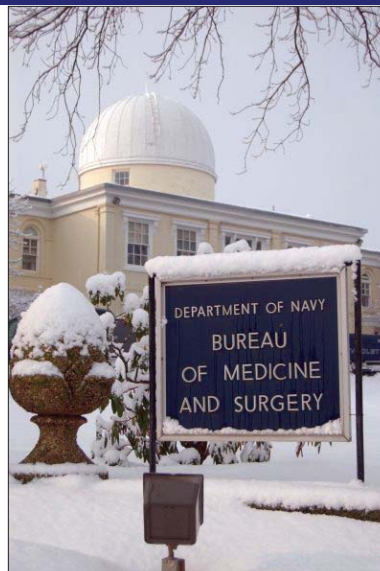
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The Bureau of Medicine and Surgery campus and the statue of Benjamin Rush successfully weathered the blizzard and gale force winds that swept the Washington DC area in January 2010. (Photos by Cmdr. Cappy Surette)

NAVY MEDICINE

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In This Issue



ON THE COVER:



PORT-AU-PRINCE, Haiti. The U.S. Navy hospital ship USNS Comfort (T-AH 20) is seen off the coast of Haiti. Comfort conducted humanitarian and disaster relief operations as part of Operation Unified Response after a 7.0 magnitude earthquake caused severe damage in Haiti Jan. 12. (U.S. Navy photo by Mass Communication Specialist 2nd Class Daniel Barker/Released)

- 4 Admiral's Call
- 6 Force Notes
- 8 Navy Medicine Steams To Assist Haiti
- 10 USS Carl Vinson's Medical Department Provide First Responder Care In Haiti
- 14 Comfort Amid The Chaos
- 20 Navy And Civilian Medical Teams Work Together To Provide Hope On Comfort
- 22 Bataan Medical Team Supports Haiti Relief
- 25 Navy Medicine Joins International Team At Haiti Field Hospital
- 27 Caring For The Littlest Earthquake Victims
- 28 Earthquake Returns Naval Officer To Homeland
- 29 NH Pensacola Surgeon Says "I Never Saw A More 'Professional' Team Than On Comfort"
- 30 "Navy Medicine Hits The Blogosphere"
- 32 USNS Comfort Crew Holds Ceremony For Haitians
- 33 Hospital Ship USNS Comfort Completes Mission
- 34 Comfort Sailors Host SECNAV
- 34 Navy Surgeon General Commends Comfort Team
- 35 JCS Mullen Praises Comfort Crew
- 36 Baltimore Welcomes Hospital Ship Home
- 40 U.S. Navy Participation In Operation Unified Response
- 44 A Look Back
A Brief History Of Navy Medicine In Haiti
- 46 Upcoming Training Events





NAVY MEDICINE SUPPORTS EARTHQUAKE RELIEF



The night before USNS Comfort (T-AH 20) deployed in support on relief operations in Haiti, I spoke with 550 of the most talented military healthcare professionals in the world. My message was simple. “You will see tragedy of unimaginable proportions and our humanitarian mission there will be a life-defining assignment for you in many ways.” Deploying the next day and arriving on Wednesday Jan. 20, the men and women of Comfort did amazing work under very tough conditions.

Navy Medicine’s response to this crisis was spectacular. I could not be more impressed by our team’s response. Navy broke all records in getting USNS Comfort underway to support SOUTHCOM’s relief efforts in Haiti. Navy Medicine responded quickly by filling the tasking order for 550 medical personnel within six hours of it being received. The medical team, coming from naval hospitals all across the East Coast from Maryland to Florida, was onboard and ready to get underway by 6 p.m. the night before the ship left its homeport of Baltimore on Saturday, Jan 16. Within 76 ½ hours from receiving the voice order to deploy on Wednesday, Jan 13, the Navy team was able to transform an industrial shipboard site into an up and ready mobile naval hospital, fully staffed and equipped with the most up-to-date medical technology, ready to provide medical care to our neighbors in desperate need in Haiti.

The scenes in Haiti have indeed been terrible and the Comfort has been a shining beacon of hope since she arrived there. Our Navy Medicine team onboard, and on other ships providing support, has seen devastation, injuries, death and destruction that they’ve never seen before. They have performed admirably in an intense and dynamic situation. Medicine is a

common language that all people understand, and it is a way to bridge differences.

More than 1,000 members of Navy Medicine performed life-saving work in support of Haitian relief. Not only saving lives, but most importantly, making a difference in those people’s lives. Our teams worked in a very difficult environment with immense needs, devastated infrastructure, and a massive logistics challenge. We distributed hundreds of thousands of food rations and water, and continued to ramp up our efforts until the people received safe food and clean drinking water.

On the best days, Haiti is a poor country. It is, in fact, the poorest country in the Western Hemisphere, and it suffers from poverty, deforestation, and political uncertainty. Of the 5-6 million people who live in Haiti, roughly 2 million live in and around Port-au-Prince. Before the earthquake struck, Haiti had recently been hit by hurricanes and floods and the quake destroyed whatever infrastructure was left. Haiti’s needs are great and I expect Americans will be there providing care for the people for some time to come until their nation is back on its feet.

Human suffering moves us to act, and the expeditionary character of our naval and marine forces uniquely positioned us to provide assistance as the vanguard of interagency and multi-national efforts following the devastating earthquake.

The ultimate mission of our U.S. Navy is simple: To defend those who cannot defend themselves. Arising from this spirit, Navy vessels over the centuries have been the mechanism that the American people have used to extend themselves outward from our shores to help others in need. Wherever there has been poverty, famine, disease, war, injustice, or danger, the people of the U.S. have launched Navy vessels to provide



Navy Surgeon General Vice Adm. Adam Robinson provides an overview of the situation in Haiti to the crew of the USNS *Comfort* Jan. 15, 2010 before the ship set sail to provide humanitarian assistance to Haiti following a 7.0 earthquake that struck the nation Jan. 12, 2010. (Photo by Valerie Kremer)

protection, food, clothing, healthcare, and the compassionate care of young Sailors and Marines. We lend a helping hand and heart to those in need of safety and security. Whether it has been in Indonesia after the tsunami, or helping the people of New Orleans after Hurricane Katrina, or today helping the people of Haiti, this is the platform of selfless service from which Navy Medicine, our sister services, and NGO's will always deliver our care around the world.

This is the meaning of humanitarian assistance, protecting others even when it places us in harm's way, extending ourselves for the benefit of those in need. Navy Medicine is not only willing and able to participate in these missions, we do so enthusiastically. Our healing hands symbolize soft power, which forges stronger relationships with other nations and lessens the chances of armed conflict.

Humanitarian assistance is so important because it has a powerful impact on people, on relationships, and on understanding of America values. Through our missions, we learn about one another and in so doing we develop relationships. Relationships on all levels; personal, professional, medical, military-to-military, and between our governments.

By giving compassionate care we bolster security, enhance stability, and most importantly create hope. Without security and stability, there can be no hope.

Hope is the ability to come together, help people in need to stabilize their lives and their communities. It is the ability to ensure that people have the basic building blocks of life,

health, shelter, fresh water, healthy food, and opportunities for education and safety which are the things that will bring about security and stability. When we have security and stability, we also have hope.

We as a government and military are committed to seeing this through and helping the Haitian people get back on their feet after this horrific natural disaster. From a military medical perspective, we'll stay in Haiti as long as it takes in order to make sure that we have competent medical help for the people that need it. So for now, and for the foreseeable future, the effort continues, with U.S. troops working alongside American civilians, troops and civilians from other countries, and with Haitians themselves, to help the country recover.

I am incredibly proud of the professionals who came together on short notice to make this deployment happen. I am equally proud of our team that remained at home and ensured that the amount of staff deployed did not affect our ability to provide quality care to our beneficiaries at our MTFs nationwide. Our medical team, both deployed and at home, responded to the challenge with extreme professionalism and pride.

You are all working hard and doing great work. Be safe, be smart, and take care of one another. It is my honor to represent you as your Surgeon General. Thank you for everything you do, but most of all thank you for your service. ⚓

Vice Adm. Adam M. Robinson, Jr.



NAVY MEDICINE

World Class Care...Anytime, Anywhere

FORTITUDE AND DEVOTION TO DUTY



FOR **O**UR **C**ORPS **E**ST **N**O **T**ES **S**
As we continue to manage shore based healthcare, our responsibilities abroad remain undiminished. We too remain steadfast in our obligation toward the deployment of our Corpsmen for duty in support of disaster relief and humanitarian assistance operations. During the entire span of Operation Unified Response, I could not be more impressed by the fortitude and devotion to duty displayed by the entire Hospital Corps.

In his guidance for 2010, the Chief of Naval Operations outlined six core capabilities vital in the execution of our maritime strategy. One of these is the provision of humanitarian assistance and disaster response. This strategy has evolved from reactive deployments of assistance, as those we had seen in the tsunami of 2004, to a more proactive response to humanitarian and disaster relief; as evidenced by the USNS Comfort (T-AH 20) and USNS Mercy (T-AH-19) ongoing missions.

Since the first proactive humanitarian deployment of the Comfort in 2006, over 409,000 patients have been treated from Navy ships operating with other services, other countries, and nongovernmental organizations. The impact of such an undertaking should never be underestimated as such contingencies are as relevant to lasting peace and security as any combat operation.

To date, 45 percent of our ships are deployed around the world and 14,000 Sailors are on the ground in the Middle East. As our Corpsmen continue to deploy and meet the

missions in Iraq and Afghanistan, they are also answered a call of distress from an impoverished Haitian nation devastated by a catastrophic earthquake on Tuesday, Jan. 12, 2010. By Wednesday, Jan. 20, 2010, over 14 ships, including Comfort, were providing care and disaster relief to the region. This, despite a crucible of war fighting obligations, is an extraordinary and unprecedented response by both the Navy and its medical team.

Corpsmen Navy-wide are setting the standard and reinforcing our service as a global force for good. In Haiti, as the likelihood of finding earthquake survivors waned, Chief Hospital Corpsman Jesse Bedia, of Marine Expeditionary Squadron 6, was called to perform a roadside emergency delivery of a newborn infant. Hospital Corpsman Third Class Yves Henry, of Comfort, had grown up just outside Port Au Prince where his grandmother still resides. His skills as both linguist and surgical technician have proven critical in providing care and a degree of solace to those besieged by disaster.

Stories such as these represent the versatility of the Hospital Corps, whose legacy is already distinguished by a critical combination of valor and compassion. The lasting effects of operations such as those in Haiti are felt as much by those providing care as those receiving it. I am never surprised but always impressed by the professionalism, dignity, and heroism displayed by our Hospital Corpsmen. Bravo Zulu Hospital Corps!✌

Force Master Chief Laura Martinez

NAVY MEDICINE MAKING A DIFFERENCE



CARIBBEAN SEA Navy Medical Corps personnel are conducting humanitarian and disaster relief assistance as part of Operation Unified Response after a 7.0 magnitude earthquake struck Haiti on Jan. 12, 2010.

AMERICA'S
NAVY

A GLOBAL FORCE FOR GOOD.™

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STEAMS TO ASSIST HAITI



USNS Comfort departs Baltimore, Md. , Jan. 16, 2010, to proceed at best speed to Haiti to provide humanitarian assistance following a devastating earthquake that left more than 230,000 dead. (Photo by Cmdr. Cappy Surette)

USS CARL VINSON'S MEDICAL DEPARTMENT PROVIDES FIRST RESPONDER CARE IN HAITI

Less than 24 hours after an earthquake devastated the island nation of Haiti, the crew onboard USS Carl Vinson (CVN 70) maintained silence while Vinson Commanding Officer, Capt. Bruce Lindsey, explained the ship's new mission to the crew. Having left for deployment the previous day, Vinson was the first and most visible naval asset to begin what would become Operation Unified Response.

Vinson had roughly 36 hours to prepare for the mission ahead, unaware of what exactly their role would be. One aspect of the disaster was certain: medical support would play a crucial part in the relief effort.

A major realization for the ship was the relatively "young" crew. Vinson

had spent the past 4 ½ years undergoing a major overhaul. The vast majority of the Sailors onboard had never deployed, let alone served in a humanitarian operation.

"The ship was brand new, in the 'big picture' of things," said Cmdr. (Dr.) Alfred Shwayhat, the carrier's senior medical officer. "We were heading toward a crisis that none of us had ever encountered before, or even thought we would ever experience."

The unfamiliar working environment required unorthodox preparation for Shwayhat and his team of medical experts, numbering 47 personnel. Hospital corpsmen immediately went to work preparing prescription medications and antibiotics they anticipated

would be needed by injured personnel onboard the ship.

"We didn't know a lot of things. We didn't know if we'd be filling the hangar bay with Haitians, or dealing only with American citizens," said Shwayhat.

Small teams of corpsmen and doctors also prepared medical kits to be taken ashore.

"We were given five-minutes notice to fly ashore," said Hospital Corpsman 2nd Class (SW/AW) Amber MacMullin. "We went in with a blindfold on. I had no idea what to expect."

The different teams packed what medical supplies they could bring and prepared to fly into the wreckage.



PORT-AU-PRINCE. The crew of a U.S. Navy MH-53E Sea Dragon helicopter from the aircraft carrier USS Carl Vinson (CVN 70) unloads food and supplies at the airport in Port-au-Prince, Haiti. The U.S. military is conducting humanitarian and disaster relief operations after a 7.0 magnitude earthquake caused severe damage near Port-au-Prince on Jan 12, 2010. (U.S. Navy photo by Mass Communication Specialist 2nd Class Daniel Barker/Released)

PORT-AU-PRINCE. Sailors aboard the Nimitz-class aircraft carrier USS Carl Vinson (CVN 70) move pallets of relief supplies as the ship arrives off the coast of Haiti. Carl Vinson and Carrier Air Wing 17 are conducting humanitarian and disaster relief operations after a 7.0 magnitude earthquake caused severe damage near Port-au-Prince on Jan 12, 2010. (U.S. Navy photo by Mass Communication Specialist 2nd Class David Shen/Released)





PORT-AU-PRINCE, Haiti. Sailors deliver an injured American citizen to USS Carl Vinson's (CVN 70) Health Services department for medical care. USS Carl Vinson and Carrier Air Wing 17 are conducting humanitarian and disaster relief operations in Haiti in response to the recent earthquake disaster. (U.S. Navy photo by Mass Communication Specialist 2nd Class Adrian White/Released)

Upon arrival in Port-au-Prince Harbor, the ship's Medical Department was immediately engaged in a fast-paced, around-the-clock schedule.

"People were dying. Some were critically injured. When we showed up, people were still being pulled out of the rubble and being dug up. Considering that we were the only 'Level 2' facility that was up to Western standards, the requests started coming in for MedEvacs," said Shwayhat.

The requests didn't stop. Vinson and Carrier Air Wing 17 completed a total of 435 MedEvacs while off the coast of Haiti.

Vinson Sailors learned quickly that flexibility would be key to their success in Haiti.

"I had two major roles during the operation," said Hospital Corpsman 1st Class(SW/AW) Joshua Nichols. "As the leading petty officer for the department, it was my job to make sure our team has everything they need, and I'm also the ship's only X-ray technician." Nichols completed 166 patient studies, totaling 350 X-rays in four days.

"During the first wave, we were receiving the most severe trauma cases," said Hospital Corpsman 3rd Class(FMF) Tomas Tongol. "We treated them with intravenous medications,

along with our other prescribed medications." Tongol was the only acting pharmaceutical technician, and sorted and distributed all medications for the 60 patients who spent time onboard Vinson.

"Empower your Sailors and trust them to do what they do well. Give them the support that they need."

—Alfred Shwayhat

Hosting a large number of seriously-injured patients was a skill not usually highlighted by aircraft carriers. According to Shwayhat, the ship once received 29 patients in a three-hour period.

"Most people would agree that any trauma center in the United States would consider that a mass-casualty scenario, let alone on a floating medical center," he said.

The hectic schedule was not limited to the confines of the carrier. During the initial wave of response, MacMullin

spent three days serving on shore. Two of those days were at Killick Coast Guard Clinic in Carrefour, Haiti. From sunrise until dusk, the CVN 70 medical team at Killick treated countless patients, and a large variety of wounds.

According to MacMullin, the medical training she had received, and often taught on the ship, was completely applicable to the situation she faced in Haiti.

"We dealt with a lot of compound fractures, burns, damaged limbs and abrasions. These are all injuries we're prepared to handle," said MacMullin, referencing the 'GITMO 8,' a series of the most common injuries occurring on an aircraft carrier, injuries that all Corpsmen are trained to address. However, it took more than textbook training to fulfill the medical needs left by the earthquake.

"There are instructions and procedures and things we are all required to do so we can 'be ready.' Frankly, none of those standard operating procedures address a scenario like this," said Shwayhat.

Vinson Medical Department proved themselves to be well-trained to tackle the assignments they faced in this unfamiliar world theatre. There were, however, some concerns going into the mission.

"The greatest challenge was coming up with a plan," Shwayhat said. "I knew that if I could provide the [medical] department with a plan to accommodate whatever the admiral authorized, that we could execute it to perfection." By dividing the medical resources appropriately between the ship and onshore, CVN 70 personnel provided the most aid possible.

Shwayhat also said that he never doubted the skills and abilities of his personnel, and hopes that the standard set by Vinson is reflected throughout the Navy.

"Empower your Sailors and trust them to do what they do well. Give them the support that they need," he said. "Everyone is very surprised at how well we did. I'm not. I knew we could do what we needed to." ✂



PORT-AU-PRINCE Haiti. Haitian citizens gather in a severely damaged compound three days after the country suffered a 7.0 earthquake disaster on Jan. 12. The Nimitz-class aircraft carrier USS Carl Vinson (CVN 70) and Carrier Air Wing (CAW) 17 arrived in Haiti Jan. 15, to provide food, supplies, humanitarian aid and emergency assistance. (U.S. Navy photo by Mass Communication Specialist 2nd Class Candice Villarreal/Released)

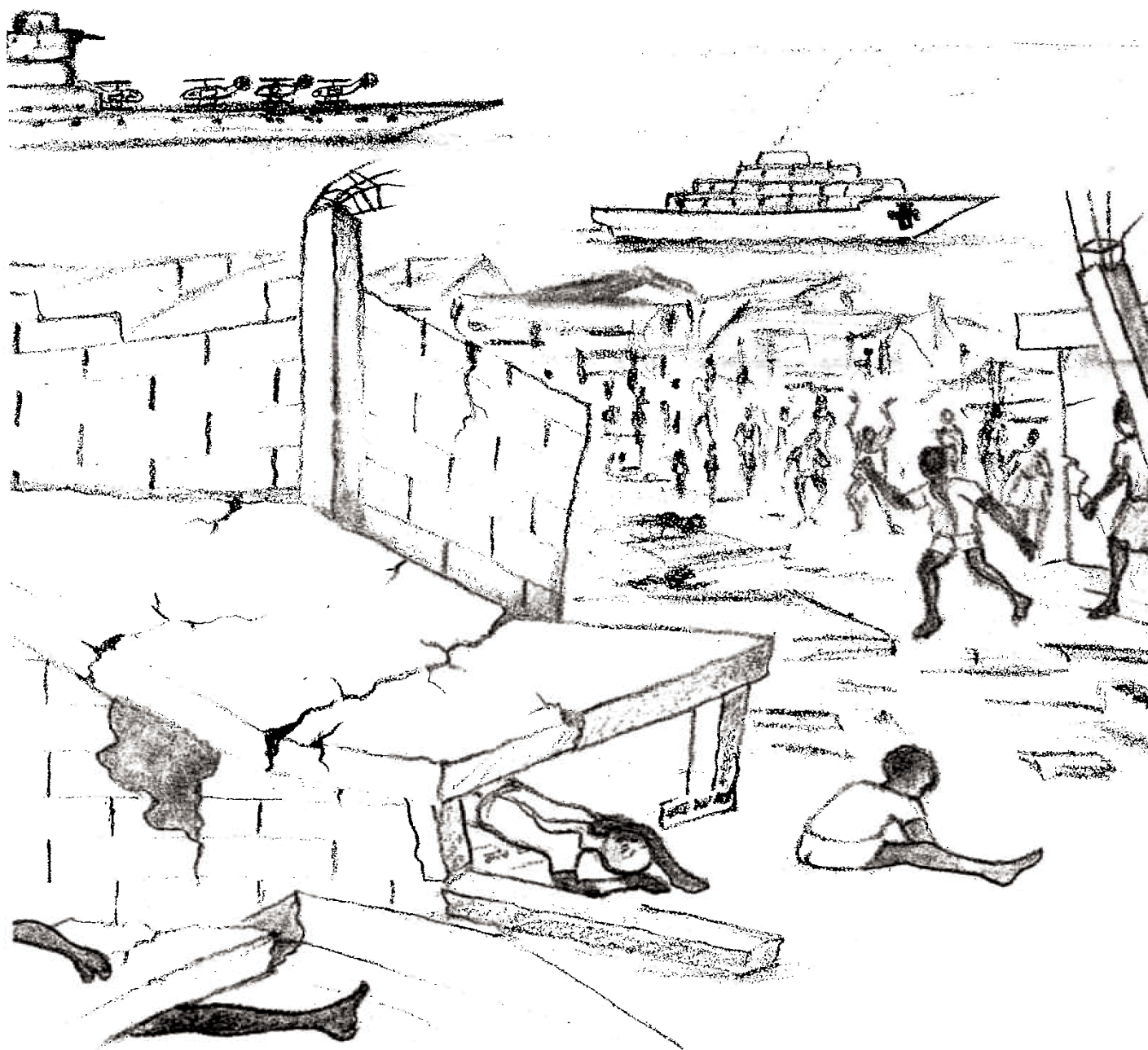


PORT-AU-PRINCE, Haiti. Haitian citizens remain in the street afraid or unable to return to their homes. (U.S. Navy photo by Mass Communication Specialist 2nd Class Candice Villarreal/Released)



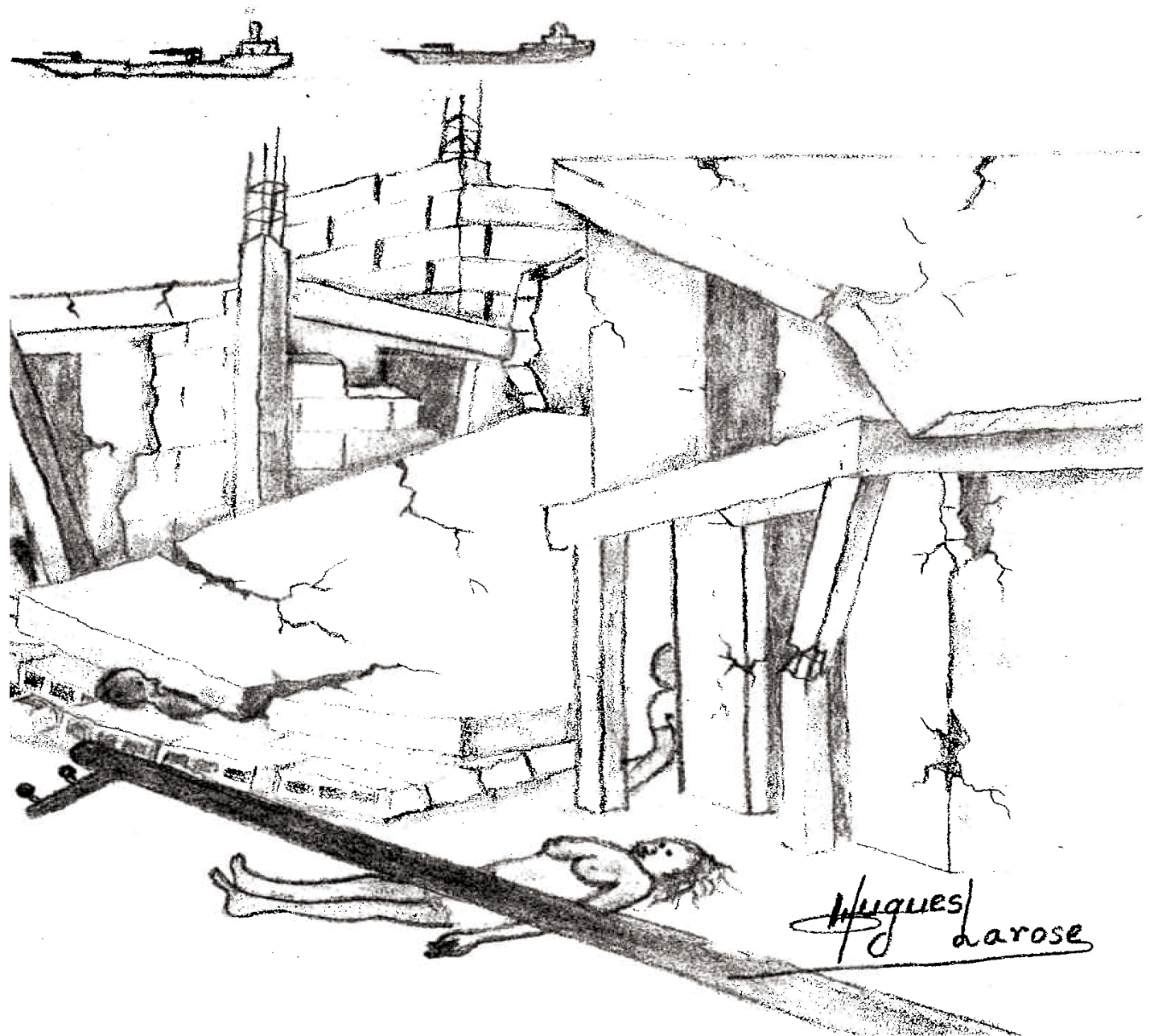
PORT-AU-PRINCE, Haiti. Homes lie in shambles after sustaining significant damage. (U.S. Navy photo by Mass Communication Specialist 2nd Class Candice Villarreal/Released)

Comfort Amid The Chaos



A Haitian woman lays motionless in a street of Port-au-Prince, Haiti, her torso crushed by a fallen telephone pole. A few feet away from her still legs is a tiny head, visible from under a pile of cracked cinderblocks. Further down the road, a man raises his hands in despair as he takes in the horrific sights that surround him.

A pencil sketch of this scene by 41-year-old Haitian Hugues Laroses vividly captures events on Tuesday, Jan. 12, the day his clavicle was fractured and right leg injured, the same day hundreds of thousands of his fellow citizens became casualties during a natural disaster no one had seen coming. But Laroses' drawing also captures the force that has helped keep him and many others alive. The horizon of his sketch contains an unshaken beacon of hope—a big, white ship emblazoned by a large cross.



Back in Baltimore Harbor on the morning of Jan. 12, Military Sealift Command (MSC) hospital ship USNS Comfort, with signature red crosses painted on its white hull, remained a quiet giant. The 894-foot ship—the length of nearly three football fields—was docked at the pier that serves as the ship's home most days of the year.

In the past, the massive ship, with its 1,000-bed onboard medical treatment facility and 12 operating rooms, had been a hub of activity while deployed to areas around the world in support of humanitarian and civic assistance missions, natural disasters, or military operations.

But, on Jan. 12, the ship was in five-day reduced operating status, or ROS, with a small embarked crew of 18 civil service mariners and 58 Navy medical

personnel, less than 6 percent of the ship's maximum complement at full-operating status. The ROS team of experts was on board to maintain the ship in a high state of readiness so that it could move into action and get underway in just five days.

On Jan. 12, Comfort was just exiting a several-month repair availability period at the pier, during which the ship was refurbished after Continuing Promise '09, the ship's four-month-long, bi-yearly humanitarian and civic assistance mission. During that mission to Latin America and the Caribbean in the summer of 2009, Comfort sailed to seven countries, including a 12-day stop in the island-nation of Haiti. Embarked doctors and dentists treated 100,000 patients and performed 1,657 life-changing surgeries.

With the ship's repair availability period complete, the ROS crew's focus was to prepare Comfort for its next scheduled deployment in 2011 and to continue to maintain the massive ship for emergency situations.

Dave Lieberman, Comfort's chief mate and the officer in charge when the ship is in ROS, was at his daughter's soccer game the evening of Jan. 12, just after Haiti experienced the catastrophic 7.0-magnitude earthquake. His phone began to ring incessantly as the horror in Haiti unfolded on television screens throughout the world. Callers wanted to know if Comfort was going to assist. While no official decisions were made that night, Lieberman and the rest of Comfort's ROS crew shifted into high gear.

"Whenever there is a natural disaster, we kind of go into that mode and start



thinking of the 'what-ifs' to be ready just in case," said Lieberman.

The following morning, Military Sealift Command, which oversees the ship's operations, received official direction from U.S. Fleet Forces Command for the ship to activate in support of the U.S. military's Operation Unified Response in Haiti.

"The news of the activation was like an electrical charge through the ship," said John Burke, Comfort's port engineer. "Within an hour of the activation I arranged with a fabrication and boiler service to have 8-12 men come up from Norfolk to assist the ship with anything needed in way of minor repairs to rigging services. While we had much to do to prepare, we knew every second counted. We had all seen the images of the

devastation. We knew we had a mission and that we must overcome whatever challenges came before us to ensure that things happened."

Hospital Ship Class Manager Claudio Azzaro said the flurry of activity that occurred in the approximately 77 hours between the ship's verbal order for activation at 5 a.m., Wednesday, Jan. 13, and the moment the ship set sail at 9:30 a.m., Saturday, Jan. 16, can only be described by one word.

"Magic," said Azzaro. "It was pure magic. It typically takes five days to ensure crew members are onboard and to conduct the necessary load-outs in Baltimore's small pier. Then the ship sails to Norfolk to board the rest of the crew and to conduct the rest of the load-outs at the Naval Base because of the ample

room for moving the massive cargo and supplies that are needed for Comfort's medical mission. This process usually takes another few days."

But Azzaro and his colleagues knew they didn't have a minute to spare. News stations announced the rising death toll every hour.

"Instead of having the ship stop in Norfolk, we moved everything and everyone up the highway to Baltimore. Even though facilitating the load-out on the narrow pier was a challenge, we still managed to complete all of the on-loads and to get every person onboard one full day before we were supposed to. Many hands working together. That's what made the magic happen."

The process of ramping up the civil service crew from 18 to 67 civil service



BAIE DE PORT-AU-PRINCE, Haiti. The Military Sealift Command hospital ship USNS Comfort (T-AH 20) operates off the coast of Port-au-Prince, Haiti, while participating in Operation Unified Response, providing military support capabilities to civil authorities to help stabilize and improve the situation in Haiti in the wake of the 7.0 magnitude earthquake that hit the area on Jan. 12, 2010. (U.S. Navy photo by Mass Communication Specialist 2nd Class Kristopher Wilson/Released)

mariners (CIVMAR) moved at top speed, too. Usually, when Comfort is activated from reduced operating status, the manning process typically occurs throughout the five-day window, said Britt Skogstad, civilian mariner placement division director at Military Sealift Fleet Support Command (MSFSC), MSC's subordinate command, which was responsible for identifying the 42 civil service mariners plus seven augment personnel who were needed to bring the ship to its full operating status. "Usually we have a phased-in approach. But this time there was a great urgency to get the ship down to Haiti faster."

Skogstad and his team got right to work as soon as they received the activation orders the morning of Jan. 13. At close of business on the same day, Skogstad had acquired a full staff of CIVMARs for Comfort.

"It was really quite amazing," said Skogstad. Other MSC ships were calling us asking, 'How many mariners do you need? We can provide some people.' When we went to the CIVMAR personnel pool, some of the CIVMARs who were waiting for assignments or routine reliefs canceled their plans and went to Comfort instead. This meant that some CIVMARs on other ships who were supposed to get relieved were delayed. But I didn't hear a single complaint. The show of support for Haiti was really heartwarming and a testament to the dedication of our CIVMARs."

Eighteen-wheel tractor-trailers filled to the brim with supplies and medical equipment lined the length of the Baltimore pier by the afternoon of Thursday, Jan. 14, transforming the quiet office space and repair locale it had been 48 hours before into "organized chaos," said Joe Kranz, Comfort's deck officer. "So much was going on." Cranes were swinging while crew members—including a detachment of volunteer CIVMARs from MSC dry cargo/ammunition ship USNS Lewis and Clark—loaded pallets of cargo. At the same time buses were pulling up with 600 medical and other

personnel on board, many of whom had flown into area airports from around the country within 24-hours of their tasking notification.

"The sight was just incredible. I've worked [in the Baltimore Harbor] for 20 years and I've never seen a load-out like this," said Steve Cartwright of Keystone Ship Berthing, the layberth operator for Comfort and six other MSC and Maritime Administration ships.

"It was like loading the Ark," said Comfort's master Capt. Robert Holley.

Holley, who is MSFSC's Port Captain West in Norfolk, was asked by MSFSC Director Jack Taylor to serve as the master of the ship for the mission. Holley agreed and reported to Comfort the morning of Friday, Jan. 15.

The 24 hours before the ship set sail was not without challenge, but the Comfort team managed to overcome every obstacle that presented itself.

"We basically had two administrative days [Jan. 13-14] where we assembled the crew, ordered supplies and started getting the boilers and propulsion machinery online. The 15th was spent loading supplies until about midnight."

Joe Watts, MSFSC's Port Chief Engineer West, normally works on the West Coast, but was in Norfolk in January for a series of meetings. On the morning of Jan. 15, the day before the Comfort team hoped to get the ship underway, Watts, who has worked many missions on Comfort's West Coast sister ship USNS Mercy, was called to participate in a phone conference on the activation and was briefed on some of the difficulties Comfort was facing. Because Comfort had been in the process of exiting a repair availability period Jan. 12, much of the onboard work was coming to a close, but the crew hadn't had time to test everything in the day before the ship was activated.

One of the ship's three giant diesel generators, used to power the hospital failed, and the other two were overheating.

"My first recommendation was to locate and rent two portable generators

to put on the ship so Comfort could have back-up power if it needed it," said Watts. Then Watts and a quickly assembled tiger team of four current and former chief engineers, a mechanical engineer from MSC headquarters, and an electrical engineer and crew members from MSC fast combat support ship USNS Arctic, flew immediately from Norfolk to Baltimore to try to assess the hospital power plant to see what was causing the overheating of the two remaining generators.

"The number three generator was out of the game, but we knew we could fix the other two."

Watts split his team in two groups. The engineers from Arctic, led by Chief Engineer Don Skurka, worked all through the night to assist Steve Starr, Comfort's assigned chief engineer who just reported aboard for this activation and is responsible for maintaining all of the ship's supporting systems, to redirect his focus to training his newly formed engineering crew on the systems of the ship.

At midnight, the other group, which was led by Andy Busk, field support division deputy director and ex-MSC chief engineer, and Jim Williams, MSC electrical engineer, focused its attention to the loading of the two 20-foot portable generators. MSC headquarters had been able to find and rent two generators and a floating crane to load the generators on to the ship.

"The MSC enterprise brought its full resources to bear," said Holley. "We were all very aware that our arrival in Haiti would bring a self-contained, self-sustaining medical asset that would really take the lead in medical relief efforts."

Comfort was able to drop off some of the members of the tiger team on a ferry as it passed by Norfolk. Watts, Busk, and Williams remained onboard to oversee last-minute engineering needs and to write a procedure for the crew to continue to operate the ship's installed generators in conjunction with the two new portable generators. Watts and his team worked closely with Starr for three

days, finishing their work a few hours before the ship arrived in Haiti.

While the engineering teams were at work below deck, Comfort's medical personnel spent much of their three-day transit from Baltimore preparing for patients by conducting drills, reviewing procedures and conducting frequent exercises that concentrated on the variety of afflictions they felt they were likely to encounter during their disaster relief efforts during Operation Unified Response.

"We anticipated treating for extreme dehydration, infections from open wounds, orthopedic injuries, and crush injuries," said Navy Lt. Cmdr. Daniel D'Auora, division officer for the casualty-receiving department aboard Comfort.

MEDICAL HELP BEGINS AS COMFORT ARRIVES IN THEATER

Late at night Jan. 19, less than seven days after Comfort's activation, the ship received the first patients from Haiti, delivered by an MH-60S "Knighthawk" helicopter from USS Carl Vinson. Just hours later, at 7:45 a.m., Jan. 20, Comfort dropped anchor off the coast of Port-au-Prince.

The two patients, a six-year-old boy and a 20-year-old man injured in the earthquake, arrived aboard the ship

shortly after 10 p.m. An initial examination confirmed that both of the patients suffered from serious injuries.

After the arrival of the first patients, the medical facility quickly filled to capacity. CIVMAR responsibilities included conducting ship-to-shore transports on Comfort's small boats; helping to crew the helicopter flight deck from at least 6 a.m. to 10 p.m. daily, while the aircraft conducted dozens of sorties a day to transport patients; completing the thousands of maintenance work orders that get submitted throughout the week; and completing a wide variety of other taskings at a moment's notice to support the ship's medical mission.

Lieberman praised Comfort's CIVMARs for remaining upbeat despite the many challenges and heart-wrenching sights of Haitian patients aboard ship. Despite the difficult circumstances, Lieberman added, "There have been absolutely no complaints. The CIVMARs run from one event to another to support anything that the Navy needs."

Lieberman noted one example where a team of CIVMARs went ashore at 1 a.m. to meet an airplane that would be delivering critical orthopedic equipment.

He noted, "We went in with a bigger boat at 3 a.m. to grab that freight and get it back out to the ship so that when the doctors started their surgeries at 6 a.m., that freight was on the operating table for them to use."

Holley says the high morale is fueled by the Comfort team's full awareness of how great Haiti's need is.

"What the world is watching on television doesn't do the situation on shore justice," said Holley. "Any concrete that isn't cracked in Port-au-Prince is being lived on by families. They're putting up tents, tarps, anything they can assemble. Mass graves are everywhere and many bodies lay beneath the rubble. Every time I go ashore and see it, it strengthens my resolve to come back to Comfort to make sure we're doing everything we can to help the Navy medical folks execute their mission."

"They have so little left right now, but this country knows and loves this ship," said Kranz, referring to Laroses' powerful drawing. "Comfort has a huge impact. It's a symbol of hope amidst this catastrophe."✧

Ms. Patrick works in the Public Affairs Office of the Military Sealift Command.



ATLANTIC OCEAN. Hospital Corpsman 3rd Class Bridgette Short, left, and Hospital Corpsman 3rd Class Mathew Vinyard inventory medical supplies aboard the Military Sealift Command hospital ship USNS Comfort (T-AH 20) to support Operation Unified Response. Comfort brings the capability of one of the largest trauma facilities in the U.S., capable of providing a full spectrum of surgical and medical services. (U.S. Navy photo by Mass Communication Specialist 3rd Class Matthew Jackson/Released)

NAVY AND CIVILIAN MEDICAL TEAMS WORK TOGETHER TO PROVIDE HOPE ON COMFORT

The Navy broke all records in getting its hospital ship, USNS Comfort underway to support U.S. Southern Command's relief efforts in Haiti following the devastating 7.0 earthquake in the country that left more than 230,000 dead. While the initial medical team onboard was comprised solely of Navy personnel due to the short-fused nature of the response, the ship soon began to welcome civilian medical professionals from throughout the United States who volunteered through a host of non-governmental organizations (NGO).

The first wave of NGO medical volunteers boarded Comfort Jan. 27 and began working side by side with the embarked Navy medical team to provide critical care for Haitian patients who were hurt during the Jan. 12 earthquake.

Project HOPE had 76 volunteer doctors, nurses and other health professionals representing 18 states and the District of Columbia during Operation Unified Response. Volunteers included medical professionals with experience in surgery, neonatal intensive care, pediatrics, post anesthesia care, intensive care and physical therapy. In total, The Navy team onboard Comfort welcomed 244 volunteers from numerous NGOs throughout the mission.

"We worked closely with NGOs like Project HOPE to bring in volunteer support to sustain the long-term mission of care for the people of Haiti," said CDR Brad Hartgerink, Director for NGO Coordination at the Bureau of Medicine and Surgery. "There were a number of outstanding NGOs eager to participate in the global outreach to help all those in need in Haiti."



Project Hope volunteer pediatricians Dr. Curran (left) and Dr. Wu take care of the youngest earthquake survivors onboard the USNS Comfort now off the coast of Haiti. (Photo by Astrid Riecken)

The Department of the Navy has become increasingly involved with other U.S. government agencies and NGOs since it adopted a new maritime strategy in 2007 that elevated stability missions to the same priority as combat operations and committed itself to working more closely with its civilian partners. Project HOPE has worked side by side with Navy during 15 other humanitarian missions including the Indonesian tsunami relief, Pacific Partnership, African Partnership Station, Hurricane Katrina and was quick to send credentialed volunteers from their database who were already experienced in working side by side with their Navy counterparts.

According to Cmdr Tim Donahue, the Comfort's Director of Surgery, the pace of providing medical care in the face of such devastation was challenging.

"The first day wasn't really a day in the truest sense of the word," said Donahue. "The first day lasted about 40 hours. That was when many of the crew members got their first break. It

only lasted about 4 hours and we had another 40 hour day receiving casualties.

Over the first four days, the team on Comfort received helicopters delivering patients every six to nine minutes. "All beds in our casualty receiving bay were filled by the early afternoon of the first day and remained filled for days as we cycled critically injured patients aboard the ship for care," said Donahue.

Non-Governmental Organizations Supporting Operation Unified Response

American Red Cross: 104

Operation Smile: 13

UCLA: 6

Johns Hopkins: 6

Project Hope: 87

Orthopaedic Trauma Assn: 11

University of Michigan: 8

United Nations Nurses: 9



Project HOPE volunteer Paul Firth, a pediatric anesthesiologist from Massachusetts General Hospital works onboard the USNS Comfort off the coast of Haiti. (Photo by Astrid Riecken)

Given the magnitude of the job, the civilian volunteers also found no shortage of work. Dr. Paul Firth, a pediatric anesthesiologist from Massachusetts General Hospital remembers being woken from a deep sleep at 4:30 am one morning by an announcement of a 'Code Blue in ICU 3' on the ship's sound system that caused him concern. Knowing that this announcement meant someone was dying in the Intensive Care Unit, Firth decided to see if he could help.

"I realized that my colleagues had been working flat out for days and were probably exhausted," said Firth. "I rolled out of bed, put on my shoes, sprinted up eight flights of stairs and pounded along the length of the ship to the ICU."

Firth found a baby who was struggling to breathe and the staff was having difficulty getting a breathing tube into his throat to assist his breathing. He was able to put in the tube and revive the child's blood oxygen levels.

"It was a long run from the lower deck at the back of the ship to the ICU at the stern," said Firth. "I've run about 25 marathons and ultra-mar-

athons in the past, but probably this was one of the more important races in my life."

"Project HOPE and the U.S. Navy together bring an unyielding and selfless spirit of care and compassion to the people of Haiti," said John P. Howe, III, M.D., President and CEO of Project HOPE. "I cannot think of a

more powerful partnership for health and goodwill for the Haitian people than the partnership formed between Project HOPE and the Navy."

USNS Comfort provides long-term support because it is self-sustaining. The safe environment and technology on Comfort make it a perfect asset to conduct training and as a base for DOD and Non-Governmental Organization (NGO) enduring support.

"Responses such as our work in Haiti require an unprecedented level of integration among our military forces and enhanced cooperation with the other instruments of national power, as well as the capabilities of non-governmental agencies and others," said Vice Adm. Adam Robinson, the Navy's Surgeon General. "Our sister services and NGOs are valued partners in providing medical care to those in need during this critical mission and will be for many years to come."

Approximately 1,500 Navy medical and non-medical support teams were involved in the humanitarian relief mission in Haiti including those embarked on the hospital ship, USNS Comfort, and other Navy ships providing needed medical assistance throughout the region.✈



Dr. Jose Irazuzta practices pediatric critical care medicine and pediatrics in Jacksonville, Florida. He joined the Project HOPE volunteer staff onboard the USNS Comfort on January 27th to care for children injured in the January 12 earthquake in Haiti. (Photo by Astrid Riecken)

BATAAN MEDICAL TEAM SUPPORTS HAITI RELIEF

A blood-curdling scream rings out across the enclosed school yard where Sailors from the multi purpose amphibious assault ship USS Bataan (LHD 5) have set up a make-shift immunization clinic for the people of Grand Goave, Haiti. “Please don’t stick me again. I’ll die if you stick me one more time. Please don’t stick me,” screams the young Haitian boy. What he doesn’t realize is these shots could very well do the exact opposite and one day save his life.

Bataan arrived off the northern coast of Haiti with the embarked 22nd Marine Expeditionary Unit (MEU) Jan. 18, and immediately began launching aircraft to get a bird’s eye view of the conditions on the ground. Those first aerial assessments confirmed what everyone had suspected. “We witnessed first-hand the destruction that exists and the desperate need for relief,” said Capt. Sam Howard, Bataan’s commanding officer. Bataan’s medical department braced for busy days ahead.

In the early morning hours of Jan. 19, helicopters began touching down on Bataan’s flight deck with Haitians in need of urgent medical care. Just five days earlier the flight deck was desolate, and the medical team was focused on preparing their spaces for the ship’s scheduled four-month maintenance availability.

Pierside in Bataan’s homeport of Norfolk, Va., the ship features a couple of doctors and a handful of corpsman, who tend to common illnesses and injuries, but on deployment Bataan embarks about 30 additional medical professionals from a fleet surgical team and Marine Expeditionary Unit. With the ship’s primary mission of sending Marines ashore for combat, medical must always be ready for mass casualty receiving.

The Fleet Surgical Team along with the inherent medical facilities—four operating rooms, a blood bank, medical



BONEL, Haiti. Chief Hospital Corpsman Rioni, a member of a Maritime Civil Affairs team, gives water to a severely dehydrated child after the devastating earthquake left the village of Bonel with a severe shortage of food and water. The multi-purpose amphibious assault ship USS Bataan (LHD 5) is on station in Haiti along with the amphibious dock landing ships USS Fort McHenry (LSD 43), USS Gunston Hall (LSD 44), and USS Carter Hall (LSD 50). (U.S. Navy photo by Mass Communication Specialist 1st Class Monique Hilley/Released)

lab, pharmacy, intensive care unit and medical ward—aboard multipurpose amphibious assault ships gives Bataan capabilities second only to the hospital ships USNS Comfort and Mercy.

“It wasn’t enough for Haiti,” said Senior Chief Hospital Corpsman Huben Philips, medical department leading chief petty officer.

A medical critical response team featuring nearly 80 additional medical staff—surgeons, nurses, corpsman, administrative support Sailors, a dentist and a United States Public Health Service (USPHS) team—began arriving aboard Jan. 19. As the new group was arriving and looking forward to a hot meal and a shower, the first of the day’s

19 medical evacuations was in the air and heading toward Bataan.

"We have four operating rooms onboard," said Phillips. "In this environment with the amount of crushing wounds expected, we needed to be able to run those operating rooms around the clock. It was fast and furious; they didn't even have time to unpack."

The additional staff worked like a charm. One of Bataan's first patients, 69-year-old Ena Zizi, had been trapped under rubble for seven days when she was finally rescued and brought to Bataan for critical first-response treatment. The medical professionals of Bataan nursed her back to stable condition before transferring her over to USNS Comfort for longer-term care. As day two came to a close, there were 22 similar stories that the Haitian patients brought aboard Bataan are expected to live to be able tell.

"The earthquake devastated the people of Haiti and the medical infrastructure of the country. Without outside aid, thousands more would have died from treatable conditions," said Cmdr. William Wallace, Fleet Surgical Team (FST) 8 officer-in-charge. Wallace said weeks into the operation, they were still bringing aboard infected wounds from the initial earthquake. "Without treatment these infections may cause the person to lose a limb or have loss of function. Helping the people of Haiti recover from this disaster was simply the right thing to do."

Although Bataan continued to see a regular stream of patients, that second day proved to be the busiest. Comfort arrived just a day later and a few days after that, USS Nassau (LHA 4) was on station; both ship's medical capabilities were superior to most post-earthquake facilities in Haiti.

Instead of waiting for patients to be flown aboard, Bataan's crew ventured into towns and villages surrounding Port-au-Prince to find those still hurting, so they could provide initial triage and get them to care.

"I sought refuge at a marina camp, and the Marines actually came and found (my son). I was one in the first group to be brought aboard the boat, and I thank God for America and the United States Marine that helped take care of (my son). The Americans took care of us as best as they could, and I send my gratitude for that," said Paster Delisca Lioner, father of one of Bataan's first patients.

Bataan and her embarked medical team continued to look for people like Lioner and his son throughout the northern coast of Haiti.

As the search continued, Bataan arrived at a clinic in Grand Goave called Lifeline Christian Ministries that had been caring for the people of Haiti long

**"When I saw
(Bataan) coming, it
was at that point when
I knew we were okay."**

—William Rutherford

before the earthquake but was overwhelmed and understaffed.

"We knew immediately an earthquake of that magnitude would be a disaster," said William Rutherford, a doctor and former Navy corpsman, who had been volunteering at Lifeline for periods of the last 20 years. "A disaster exists when you have one more patient than you have resources, and that is Haiti on its best day."

Rutherford was working around the clock at Lifeline when Navy doctors and corpsman first arrived.

"When we first had the U.S. Navy come in, I can't remember who it was, but two Navy medical personnel walked through the gate and said, 'We are looking for the two American doctors from Indianapolis,'" said Rutherford. "That was the first time I came close to losing it. When I saw (Bataan)

coming, it was at that point when I knew we were okay," said Rutherford.

Bataan dug in at Lifeline. Patients with minor injuries were treated on the spot. Those who presented beyond the capabilities of the small clinic were evacuated to Bataan or Comfort.

"It's important to have those clinics ashore to help evaluate wounds, change bandages and other routine wound care. Someone with a minor cut or broken bone should not have to lose a limb," said Hospital Corpsman 1st Class Richard Rock, X-ray technician aboard Bataan. "Most of the initial injuries were orthopedic in nature, a lot of crushing injuries. As time goes by and those wounds, along with burns and lacerations are left untreated, they are likely to become infected. It was important for us to get in there and get the ball rolling."

Three weeks into the Operation, Bataan's Navy/Marine Corps Team had treated more than 1,000 Haitians both aboard Bataan in the ship's medical facility and working side-by-side Doctors Without Borders' physicians at local clinics like Lifeline.

"The statistics don't lie, but it's one thing to be told you're making a difference, it's another to look into the eyes of a life you've changed forever," said Phillips, who was frequently going ashore to treat patients with Rutherford by day and returning to Bataan to treat more patients at night.

Bataan collectively looked into those eyes when 8 lb. 3 oz. Theo Joe, a baby boy, was born healthy Jan. 30, in the ship's hospital.

"Everyday it gets a little better for these people, and if you're making progress forward, even if it's small, it's still progress, and we need to keep that going," said Phillips.

Rutherford said the Navy helped bring the situation at Lifeline under control.

"Bataan is an enabler," said Howard. "We can get the right things to the right people. We can provide a stop gap in a number of areas, but the people of Haiti

and the folks who were helping are in the best position to sustain aid. Things may never be back to normal, but hand-in-hand, we can help create a new normal”

With Lifeline fully functional, creating that new normal was next on the list, and the USPHS team embarked aboard Bataan, was up to the task.

USPHS first goal, in partnership with Navy medical aboard Bataan, was to put some preventive health measures in place to keep healthy Haitians healthy and in turn out of the clinics necessary to treat the more serious earthquake related injuries.

“We administered 1,200 vaccinations (the first day) of Typhoid, Tetanus, Measles Mumps and Rubella to children and adults,” said Hospital Corpsman 3rd Class Stacie Coursey, a corpsman aboard the Bataan, who accompanied USPHS out into the streets of Grand Goave to help with the vaccinations.

The pace didn’t slow until they’d reached the majority of the population in the small town. When they had completed the job in Grand Goave, they found Carrefour, another small town with a Haitian population in need. They plan to move on, one patient at a time.

“It’s nice to come out here and see all the good we can do. The people here are grateful and it’s good to be part of the team,” said Cmdr. Brianna Skinner, a veterinarian attached to USPHS.



BAIE DEGRAND GOAVE, Haiti. Senior Chief Hospital Corpsman Huben Phillips carries a Haitian infant into the medical triage area aboard the multi-purpose amphibious assault ship USS Bataan (LHD 5). The ship went into a mass casualty environment for more than two hours, bringing aboard 19 Haitians in need of medical care. (U.S. Navy photo by Mass Communication Specialist 3rd Class Ash Severe/Released)



BONEL, Haiti. Doctors and nurses at Hospital Cardinal Leger, a tent hospital outside of Leogane, Haiti, treat patients in need of medical care in Haiti. The multi-purpose amphibious assault ship USS Bataan (LHD 5) is on station in Haiti. (U.S. Navy photo by Mass Communication Specialist 3rd Class Cory Rose/Released)

NAVY MEDICINE JOINS INTERNATIONAL TEAM AT HAITIAN FIELD HOSPITAL

Navy doctors, hospital corpsmen and other Sailors assigned to USS Carter Hall (LSD 50) joined a team of international doctors at a field hospital in Leogane, Haiti, to provide primary medical and dental care to the Haitian people as their country recovers in the wake of the earthquake.

The field hospital, an initiative by the Dominican Republic, is an international effort. In addition to Carter Hall medical staff, medical professionals from the U.S., France, Germany, Cuba, Brazil and other countries volunteer.

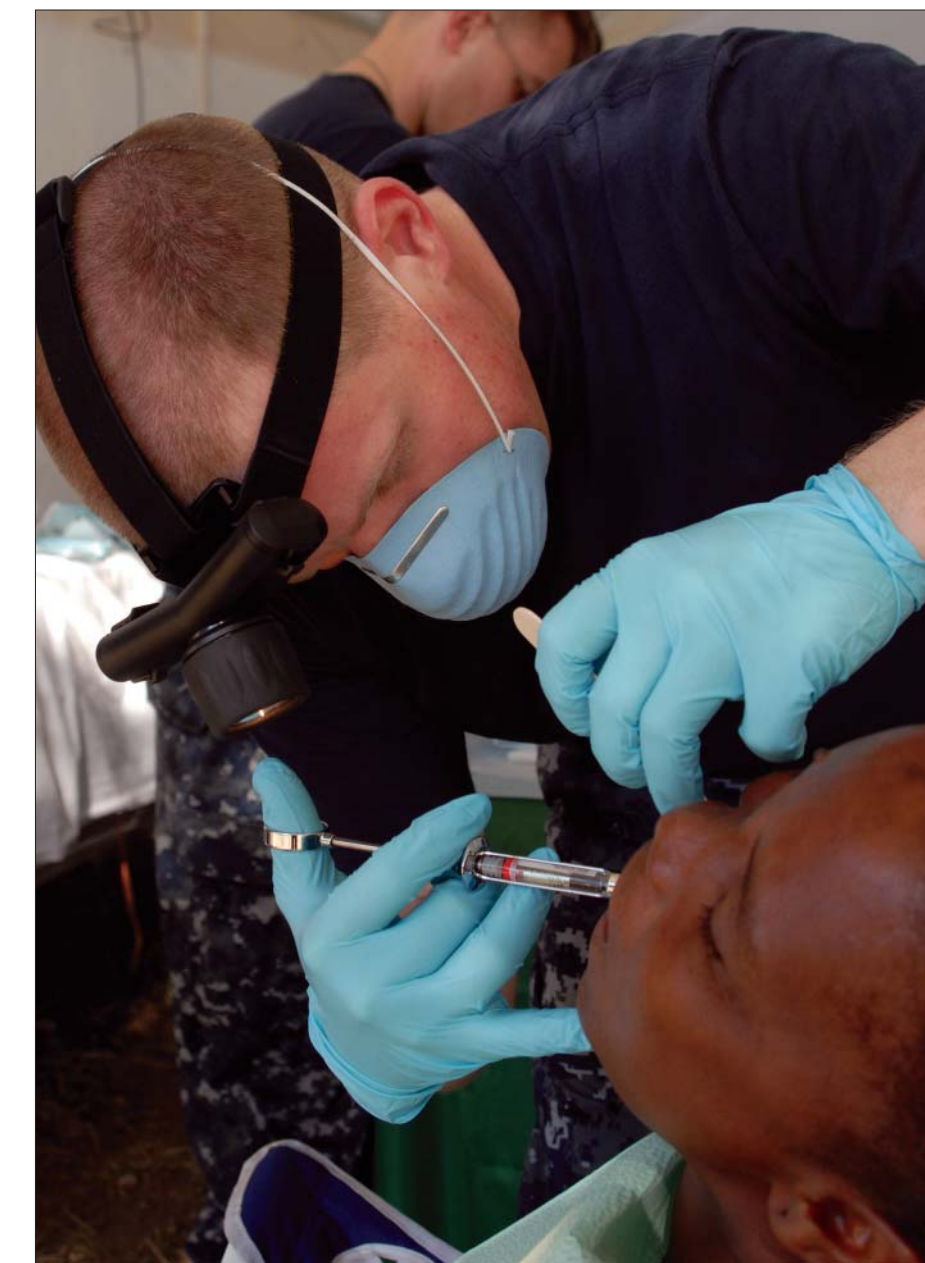
"After the earthquake, a team of Dominican doctors, nurses and logistic personnel opened up this camp," said Rafael Taveras, field hospital coordinator from the Dominican Republic. "Since we've been here, the international response has been great. We have people from all parts of the world who have joined this joint effort."

The field hospital is set up outside the Hospital Cardinal Leger, a private hospital which was the most modern medical facility in Leogane before it was nearly destroyed by the earthquake. Now, several tents in the front of the hospital act as makeshift doctor's offices where more than 800 patients have been treated in the past three weeks.

"We're helping any patients who need medical care," said Lt. Dalia Figueroa, temporarily assigned as medical officer aboard Carter Hall. "They can come here and get help."

Working with a diverse group of medical professionals has been a unique experience for both the Carter Hall staff and the international organization volunteers.

"I've had the opportunity to work with medical professionals from different countries," said Hospital Corpsman 2nd Class (FMF/SW) Sergio Hernandez, from Carter Hall. "I've learned from them and got to see how they do their jobs. It's fascinating to see so many dif-



LEOGANE, Haiti. Lt. Joseph Reardon, a dental officer assigned to the amphibious dock landing ship USS Carter Hall (LSD 50), administers anesthesia to a patient before extracting a tooth at the Hospital Cardinal de Legar in Leogane, Haiti. (U.S. Navy photo by Mass Communication Specialist 1st Class Hendrick Dickson/Released)

ferent approaches to medicine. This is an experience that I will always remember."

"It's very interesting," said Tina Schultz, a doctor from Germany. "We're close and we can ask each other for help if we need it. There have been no problems and everyone is very friendly."

In addition to the medical staff, more than 100 other Carter Hall Sailors and Seabees from Amphibious Construction

Battalion 2 helped at the hospital clearing rubble from the dilapidated buildings around the facility.

"They [Sailors] have been super helpful," said Taveras. "They join us in treating patients and they've been here cleaning up a lot of the buildings."

The hospital is a revolving door of medical professionals. Some stay a few days or weeks and others will stay for

months. Despite the turnover, there is a camaraderie that is forged by the determination to help.

"Everyone is focused on just one idea: to come here and help," said Taveras. "The field hospital is a special place for people to join and experience giving medical aid to others."

"It's a great feeling to be here," added Lt. Joseph Reardon, Carter Hall dental officer. "There is a definite need to help these people. They're very appreciative and they will come from miles away to seek treatment. I enjoy being here tremendously."

USS Bataan (LHD 5), and amphibious dock landing ships USS Fort McHenry (LSD 43) and Carter Hall provide military support capabilities to civil authorities stabilizing and improving the situation in Haiti as a part of Operation Unified Response.



▲ BAIE DE GRAND GOAVE, Haiti. Medical personnel aboard the multi-purpose amphibious assault ship USS Bataan (LHD 5) swaddle a newborn baby after the child was born in the ship's medical department. The baby boy was the first baby ever born aboard Bataan. (U.S. Navy photo by Mass Communication Specialist 2nd Class Kristopher Wilson/Released)



PORT-AU-PRINCE. Sailors from USS Carl Vinson (CVN 70) medically evacuate a young boy recently flown in from Port-au-Prince, Haiti. (U.S. Navy photo by Mass Communication Specialist 2nd Class Adrian White/Released)

CARING FOR THE LITTLEST EARTHQUAKE VICTIMS



PORT-AU-PRINCE, Haiti - Capt. Daniel P. Smorhun, a Cardiologist from the USNS Comfort listens to the heart of an infant with a suspected heart condition during a visit to University Hospital in Haiti. (U.S. Navy photo by Lt. Janette Arencibia/ Released).



JACMED, Haiti. An 18-day-old Haitian girl rests in a field hospital after spending eight days trapped in her home before being rescued by relief workers as part of Operation Unified Response. (DoD photo by Mass Communication Specialist 2nd Class Daniel Barker, U.S. Navy/ Released)

EARTHQUAKE RETURNS NAVAL OFFICER TO HOMELAND

A Navy Environment Preventive Medicine Unit Five (NEMPU-5) Staff member never imagined his next visit to his birth nation would be in the midst of a national emergency.

Lt. Johnfritz Antoine, a native of Port-au-Prince, Haiti, made his last visit home in 1992.

"I volunteered, I called my specialty leader the morning after and told him that this was my baby and they all agreed. I sent the email out Tuesday morning and at 10:30 a.m. the same day I was officially tasked," said Antoine. "I have been all over the world providing help in relief efforts to perfect strangers. This is home for me, this is the place I was born, I have done it else where why not do it at home too."

Antoine grew up in Haiti and moved to the United States when he was 12. His father worked for a company that was closing in Haiti but offered him a job in the U.S., so Antoine moved with his whole family to Brooklyn N.Y.

"Growing up in Haiti was a happy place; there was a lot of family time. I have a big family; I have 11 uncles and 55-56 cousins. I remember summer camp the most. It was a lot of fun," said Antoine.

In 2004, he joined the U.S. Navy after being inspired from working at ground zero. As an environmental health inspector, he started working at ground zero five days after the Twin Towers came down until 18 months later when he went back to his previous job as safety enforcement and recovery and clean operations with the health department.

"I didn't know much about the military growing up in New York City," said Antoine. "I met some of the Navy's Environmental Health and Industrial Hygiene inspectors at ground zero, and since I was doing the same type of work, they thought it would be a perfect fit. They told me to check out the Navy's



Lt. Johnfritz Antoine, a native of Port-au-Prince, Haiti, volunteered to provide medical relief to Haiti. (Official Navy photo)

Health and Industrial Hygiene program so I did. After I graduated, I joined."

He also wanted a different career path and a chance to travel; the military gave him the opportunity to do so. His first duty station was Naval Medical Center San Diego (NMCSD), where he deployed aboard USNS Mercy (T-AH 19) and also to Iraq. NEMPU-5 is his second command in the Navy.

"I have traveled in support of the tsunami relief in Southeast Asia, Cambodia, New Guinea, Vietnam and Indonesia. I have been to Iraq twice, and Kuwait," said Antoine.

His humanitarian assistance experience along with his ability to speak both native languages (Haitian-Creole and French), will lend well to his assign-

ment in Haiti, where he will work with NEMPU-2 forward deployed preventive medicine unit homeported in Norfolk, Va.

"My goal is to bring a Joint Task Force effort from a preventive medicine and medical stand point to help the people of Haiti move forward. Whether it is from infection control to preventive medicine and environmental help with vector issues. For example, the flies and mosquitoes, with Haiti being a tropical island, are a big problem because of malaria and dengue fever. Those are the things were going to tackle to help alleviate the burden some of what the Haitian people are suffering with right now," said Antoine.✍

NAVAL HOSPITAL PENSACOLA SURGEON SAYS “I NEVER SAW A MORE ‘PROFESSIONAL’ TEAM THAN ON COMFORT”

“I’ve never worked with a more dedicated and professional team of Navy Medicine providers” than those serving with the Navy hospital ship *Comfort* on its humanitarian mission off the coast of Haiti, says a Naval Hospital Pensacola general surgeon.

With those words, Cmdr. James W. Christopher kicked off a round-table meeting with a pair of NH Pensacola Medical Corps colleagues to discuss their work in “Operation United Response.”

The trio is the first of a handful of Pensacola staff to return from three weeks of non-stop work onboard the USNS *Comfort*. The NH Pensacola command deployed 35 staffers to the hospital ship.

Cmdr. Kimberly Fagen, of St. Petersburg, Fla., was one of three radiologists aboard *Comfort*.

In the first few days after arrival of *Comfort*, and its assigned specialists, off Haiti’s coast “some of the radiological equipment wasn’t up to speed or had been disconnected,” said Dr. Fagen.

But it was quickly put back into service by the radiology team with assistance from BioMed technicians onboard. NH Pensacola Radiology Technicians joining Cmdr. Fagen’s radiology team on *Comfort* included Hospital Corpsman 1st Class Tai Nguyen and Hospital Corpsman 2nd Class Rachel DeJong.

During her tour, Dr. Fagen read more than 2,700 radiographs, CTs and ultrasounds for 800-plus patients brought aboard *Comfort*; and in a quiet moment, after the staff did a cranial scan of a Haitian baby, Cmdr. Fagen got to hold the child in her arms.

For urologist Lt. Cmdr. Timothy J. Redden of Fort Wayne, Ind., the experience was “like riding a bike.” But he did admit he hadn’t done some of the surgeries with which he was involved since his general surgical internship at Naval Medical Center San Diego in 2002.

Cmdr. Redden routinely performs urological surgeries at NH Pensacola, Eglin [AFB] Hospital, Fla.; and robotic surgeries

at West Florida Regional Medical Center in Pensacola.

“Good thing I had such a good leader,” he said with a wry smile while looking across the table at Cmdr. Christopher.

The urologist, who is fluent in Parisian-French, said when the translators weren’t around to translate the main language of Haitian-Creole, “the patients and I managed to communicate. About 90 percent of Haitians have an understanding of French,” he said.

Joining Dr. Redden aboard *Comfort*, from the Pensacola Urology team, were Hospital Corpsman 3rd Class Kendall Moore and Hospital Corpsman 3rd Class Erica Watts.

Dr. Christopher, of New Roads, La., performed 74 surgical procedures while onboard the hospital ship over three weeks. But the largest number of surgeries were orthopedic, he said. “The orthopedists [such as NH Pensacola’s Cmdr. Richard Savarino] were turning and burning sometimes up to 17-to-18 hours a day”—although at least one OR was operating 24/7—in the first week that *Comfort* was on station.

“I’ve never worked with a more dedicated and professional team of Navy Medicine providers in my entire Navy career,” continued Cmdr. Christopher, who has completed Individual Augmentee deployments to Afghanistan and Iraq.

“The fact that we’d never worked with the majority of these people before speaks volumes for the professionalism of this Navy Medicine team effort,” he concluded.

Other members of the NH Pensacola surgical services team joining Dr. Christopher were anesthesiologists Lt. Cmdr. Jason Patacsil and Lt. James Wright; nurse Lt.j.g. Denise Black; general surgeon Lt. Victor Gordon; Hospitalman Freeman Morris and Hospital Corpsman 3rd Class Christopher Ryan.

Rod Duren is Naval Hospital Pensacola Public Affairs Officer



PORT-AU-PRINCE, Haiti. Medical professionals aboard the Military Sealift Command hospital ship USNS *Comfort* (T-AH 20) delivered baby Esther at 2:27 p.m. on Jan. 21, 2010. She is the first baby delivered aboard the 1,000-bed floating hospital. Weighing less than five pounds, baby Esther was delivered seven weeks prematurely by cesarean section as her mother sustained pelvis and femur fractures during the earthquake. Despite being premature, she is healthy and was delivered without complications. (U.S. Navy photo by Mass Communication Specialist 3rd Class Matthew Jackson/Released)

"NAVY MEDICINE HITS THE BLOGOSPHERE"

Someone recently asked me to describe what things were like aboard the ship the first few days after we arrived on station in Haiti. Though I can point to numbers of patients seen, the number of X-rays performed, the number of surgeries we completed, and to other easily obtainable statistics, they don't give you the real flavor of what things felt like. The analogy I keep coming back to is the scene from Rocky III when Rocky finishes the first round of his bout with Mr. T. He sits down in his corner after getting his clock cleaned and he realizes he's in for a real battle.

I've completed three deployments aboard Comfort, have been the director of surgery for the past two years, know the capabilities and capacity of the ship inside and out, many of my shipmates had been with me for the mission that ended in August, and even I was dumbfounded by the magnitude of what we were experiencing. My surgeons who have more than fifteen combined deployments to Iraq and Afghanistan relayed that they'd never experienced this number of critical casualties over such a short and sustained period of time.

The first day wasn't really a day in the truest sense of the word. The first day lasted about 40 hours. That was when many of the crew members got their first break. It only lasted about four hours and we had another 40 hour day receiving casualties.

Over those first four days, we received helicopters delivering patients every six to nine minutes. Our casualty receiving bay, which is basically the ship's emergency room, can hold 40 patients at a time.

All beds were filled by the early afternoon of the first day and remained filled for days as we cycled critically injured patients aboard the ship for care.

By ten days into our mission, the ship's census had over 540 patients with almost 60 in the intensive care units. This number of patients was nearly equivalent to the combined censuses of the major naval medical centers at Bethesda, Portsmouth, and San Diego.

Unlike a typical mass casualty where you would see a wide variety of patients ranging

from minimally wounded to the extreme of those who aren't expected to survive their injuries, all patients we received for the first two weeks were critically injured and had survived the initial ravages from the quake. More than 90 percent had major bone fractures and three quarters of these had more than one broken bone. These broken bones were complicated by the loss of skin and muscle in the surrounding areas, bones protruding through the skin, and massive wound infections.

We had nearly 30 patients with broken backs and varying degrees of paralysis. The process of triage, prioritizing the injured patients to the order in which they'll re-

"The first day wasn't really a day in the truest sense of the word. The first day lasted about 40 hours."

ceive care, was the greatest challenge of the first weeks. All patients required surgery for their overwhelming injuries and the priority list continually changed as newer and sicker patients arrived.

I recall continually walking the casualty receiving bays from first bed to last, starting over from the beginning, and always identifying a whole new set of patients that hadn't been there an hour earlier. Often this new wave of patients contained ones whose injuries bumped them to the top of the emergent surgery list. It was the most dynamic surgical environment any of us had ever seen.

We quickly began running all of our operating rooms to full capacity and many of these ran continually day and night as we moved through the wards and patients awaiting surgery. Recognizing that we needed additional sub-specialty manpower, we were able to recruit the assistance of some of our volunteer colleagues for what we described as the "orthopedic surge".

Twenty five colleagues joined us from the Orthopedic Trauma Association, Operation Smile, United Nations Nurses, and Johns Hopkins Emergency Medicine non-governmental volunteer organizations to provide surgical, nursing, and anesthesia support that allowed us to operate on a greater number of complex orthopedic trauma cases. In a span of a little more than three days, we were able to operate and repair more than 90 complex fractures with the assistance of some of the world's experts in orthopedic trauma. A reporter asked me recently if I have any fond memories or uplifting stories from the experiences on the ship. Two things came to mind and none of them were really what she was looking for as examples. The first was how the entire ship's crew rallied to the flood of critically injured patients arriving aboard. I learned during past deployments that every crew member aboard, medical or not, has some ownership of the patients who arrive.

Flight crew members stop me in the hallway and ask how patients they delivered did in the operating room. I saw food service staff make special meals for patients who only eat certain types of oatmeal. I've watched the blood bank officer go to the ward to see how a transfusion went.

Life in those first few weeks was chaotic but in many ways much simpler.

The focus of the entire crew was on patient care and doing the most good for the greatest number of patients. There was no time for any other activities and little less for rest.

For every person who lived aboard Comfort for those first three weeks, it was a life-altering experience. I have never been more proud to be a part of the Navy and cannot imagine that I will ever serve with a greater group of people. Their legacy will be felt for a generation to come amongst the people who received care aboard our ship.✍

Cmdr. Tim Donahue was the Director of Surgery onboard USNS Comfort during the deployment to Haiti.



USNS COMFORT. Maj. Tom Salisbury, Capt. Richard Sharpe, Cmdr. Richard Savarino, and Hospital Corpsman 3rd Class Christian Quintero support a skin graft surgery aboard the Military Sealift Command hospital ship USNS Comfort. Comfort staff performed 843 major medical surgeries during their deployment to Haiti. (U.S. Navy photo by Mass Communication Specialist 2nd Class Chelsea Kennedy/Released)

USNS COMFORT CREW HOLDS CEREMONY FOR HAITIANS

During their last day off the coast of Port-au-Prince, crew members gathered on USNS Comfort's (T-AH 20) flight deck for a remembrance ceremony to honor the people of Haiti still recovering from the aftermath of an earthquake.

The Mar. 9 service began with command chaplain, Cmdr. David Oravec leading a prayer, followed by a moment of silence.

"What has happened here has changed the course of our lives," said Oravec. "Because we have come here we have changed the course of many people's lives here in Haiti."

A highlight of the ceremony was Comfort's translator division, many of Haitian-American descent, performing a rendition of Ayiti Cheri (Haiti My Darling), sung in Creole.

Sailors serving as translators aboard the hospital ship came from various

Navy commands throughout the fleet. Many of the translators were personally affected by the loss of friends and loved ones during the disaster.

"We will never forget what we have accomplished here in Haiti," said Hospital Corpsman 3rd Class Magalie Jones, who speaks French as well as Creole. "Our hearts go out to all of Haiti."

Another highlight of the ceremony was a song written and sung by Logistics Specialist Seaman Sean Garland about the experiences and emotions of caregivers and patients during the medical mission.

"My song 'New Beginning' is a tribute to those affected by the earthquakes in Haiti and Chile and to those who work every day to try and help," Garland said. "I was honored to play my song at the ceremony."

The ceremony allowed Sailors and civilian mariners to reflect on the tragic events and the enormity of their efforts

to ease the suffering as a result of the 7.0 magnitude earthquake.

"This was a spectacular feat," said Lt. Cmdr. Robert Fetherston, a perioperative nurse aboard Comfort. "With so much collaboration from so many commands, we were able to do so much good in such a short amount of time."

While in Haiti, Comfort treated 871 patients and performed 843 surgeries. In the first 10 days Comfort treated more than 540 critically injured patients. During the span of the mission nine infants were delivered on board the hospital ship.

"As we prepare to depart," said Oravec. "It is good, that we pause to remember the people of Haiti and to consider how our lives have changed and in many ways been greatly enriched because we have been called forward on this mission." ✍



HOSPITAL SHIP USNS COMFORT COMPLETES MISSION



Hospital ship USNS Comfort (T-AH 20) completed its mission.

Over the course of seven weeks, the ship's U.S. military and civilian medical personnel treated 871 patients, receiving at the height of the recovery effort one patient every six to nine minutes.

Comfort departed its homeport in Baltimore Jan. 16, and arrived three-and-a-half days later and immediately began supporting humanitarian relief efforts in Haiti. Prior to anchoring off the coast of Port-au-Prince Jan. 20, Comfort was already receiving patients in transit via airlift. During portions of the relief effort, nearly 1,300 medical personnel from the U.S. military and various non-governmental organizations (NGOs) were embarked and treating earthquake survivors.

Medical personnel aboard Comfort performed 843 surgeries during their mission in Haiti. According to the ship's Director of Surgery, Cmdr. Tim Donohue, Comfort had more than 540 critically injured patients onboard within the first 10 days. During the initial phase of its mission, the ship ran 10 operating rooms at full capacity to care for severely injured earthquake survivors. The ships

medical crew also delivered nine infants during the relief mission.

Patients treated aboard Comfort included injured Haitian and U.S. earthquake survivors, as well as U.S. and international military personnel transferred to the ship by physicians on the ground for surgical and non-surgical care.

Volunteer experts from the Orthopedic Trauma Assn, Project Hope, Operation Smile, United Nations Nurses, John Hopkins Emergency Medicine and other NGOs provided the ship's medical team with orthopedic trauma, surgical, nursing and anesthesia support.

"We are immensely proud of the contributions made by everyone who helped treat critically-injured survivors aboard Comfort," said U.S. Air Force Gen. Douglas Fraser, commander of U.S. Southern Command. "Their efforts saved the lives of many patients and helped everyone treated begin the important process of recovery. Their rapid response and contribution to the international relief efforts in Haiti helped the country overcome an urgent medical crisis at a time when access to surgical care on the ground was very limited."

By early February, as relief efforts increased and medical treatment facilities

ashore expanded in their ability to treat more patients and provide greater care, the amount of earthquake victims requiring transit to Comfort naturally declined. Comfort's last patient was transferred for follow-on care to a recovery facility in Haiti Feb. 27.

During the mission, the ship worked closely with Haiti's Ministry of Health and health care professionals from the U.S. Agency for International Development (USAID), international relief organizations and NGOs to secure follow-on care for patients in recovery.

While deployed for Operation Unified Response, U.S. Naval Forces Southern Command (NAVSO) had operational control of all maritime assets in the U.S. Southern Command (SOUTHCOM) region. In support of Operation Unified Response, NAVSO is tasked to coordinate the U.S. Navy's response to disaster relief in Haiti following a 7.0 magnitude earthquake Jan. 12. The focus of Operation Unified Response is to alleviate the suffering of survivors and support humanitarian relief efforts.✚

COMFORT SAILORS HOST SECNAV

Secretary of the Navy Ray Mabus visited Sailors aboard USNS Comfort (T-AH 20) March 1 to thank them for their continued efforts in supporting Operation Unified Response by providing critical medical care to the people of Haiti.

While aboard, Mabus expressed his appreciation for the immediate response of the hospital ship to mobilize numerous Sailors, civil service mariners and non-governmental organization volunteers.

"The main reason I came down here, aside from seeing Haiti, was to see what has happened here and what you have done," said Mabus. "I want to simply say thank you for the skills you have, the dedication you have, and the hours you put in. Thank you for everything you have done on behalf of the United States for the people of Haiti."

Mabus spoke with several Sailors about their experiences and lessons learned before addressing the crew to highlight the international impact of the hospital ship's medical relief efforts.

"To have Comfort anchored off the coast of Haiti shows a completely different face of America," Mabus said. "It shows what we can do, and that we are here to help."

Mabus also toured several areas onboard the ship, getting a first-hand look of the operating room and casualty receiving area where more than 900 patients were initially seen and admitted for treatment.

Having him aboard the ship provided an instant boost of morale.

"The Secretary of the Navy's visit was a morale booster for me," said Personnelman Seaman Apprentice Brittany King. "Even though I am not in the medical field, I felt good after his remarks because he acknowledged the contributions of every Sailor on this ship."

"It was nice to have him aboard our ship eating food with our Sailors and speaking with them," said Legalman 1st Class (AW/SW) Raysa Turner. "Junior Sailors really look forward to visits like this."✍



Navy Surgeon General Vice Adm. Adam M. Robinson, Jr., welcomes the men and women of the USNS Comfort home during the hospital ship's brief stop in Norfolk, Va. Jan. 13, 2010. Comfort stopped in Norfolk to offload some crewmembers and equipment.

"I am incredibly proud of the professionals who came together on short notice to make the deployment hap-



PORT-AU-PRINCE, Haiti. Secretary of the Navy (SECNAV) the Honorable Ray Mabus talks with Sailors about their experiences supporting Operation Unified Response aboard the Military Sealift Command hospital ship USNS Comfort (T-AH 20). In addition to meeting with Sailors, Mabus addressed the hospital ship's crew, thanking them for their hard work and dedication to the multinational effort to provide humanitarian assistance to Haiti. (U.S. Navy photo by Mass Communication Specialist 2nd Class Chelsea Kennedy/Released)

JCS MULLEN PRAISES COMFORT CREW

The Chairman of the Joint Chiefs of Staff, Adm. Mike Mullen, visited USNS Comfort (T-AH 20) Feb. 26, to meet with Sailors supporting Operation Unified Response in Haiti.

While aboard, Mullen applauded the joint crew of civilian mariners and Sailors whose efforts have already led to the successful treatment of more than 900 Haitians injured in the 7.0 earthquake that struck the Caribbean nation last month. "You got down here in record time and made a huge difference," Mullen said.

During the visit, Mullen emphasized the need for shipmates to continue to look out for each other as much as they do for the patients under their care.

"I call it care for the caregiver," Mullen said. "I can only imagine what you've been through and seen and the decisions some of you had to make. Don't just wait for that to blow up on you. Make sure we're paying attention [to each other]. Make sure you work your way through what you've seen."


Mullen also inquired about the general morale of the crew and how their families were doing back home.

"I came down here to say a lot of things," said Mullen. "One of those things I want to do is say thank you. Thanks to your families who make this possible. We just couldn't do it without their support. They're proud of what you're doing."

"It's hard for me to put into words the significance of what you've achieved," Mullen said. "It's known not just by those of us in the military and this country, it's known globally."

Many of the crew members on board were very excited about Mullen's visit, eager to hear what he had to say.

"It was a great morale booster," said Hospital Corpsman 1st Class Lesley Prasad, a Comfort surgical technician. "I think everybody who greeted him was really excited and pleased to see him here supporting us." ✍



pen," said Vice Adm. Adam Robinson, Jr. "Comfort has been a shining beacon of hope since she arrived there and our medical team on board the hospital ship, and on other ships providing support, have performed admirably in an intense and dynamic situation. Medicine is a common language that all people understand, and it is a way to bridge differences." (Photo by Cmdr. Cappy Surette) ✍

PORT-AU-PRINCE, Haiti. Chairman of the Joint Chiefs of Staff Adm. Mike Mullen speaks with Lt. Cmdr. Anthony Mortimer and other Sailors aboard the Military Sealift Command hospital ship USNS Comfort (T-AH 20). Mullen was aboard Comfort to congratulate the crew on their efforts supporting Operation Unified Response. (U.S. Navy photo by Mass Communication Specialist 2nd Class Chelsea Kennedy/Released)



BALTIMORE WELCOMES HOSPITAL SHIP HOME

Hundreds of excited friends, family and members of the local community crowded Canton Pier in Baltimore for the homecoming of hospital ship USNS Comfort (T-AH 20) March 19.

Excitement grew as the hospital ship became visible as it emerged under the Key Bridge in Baltimore, and media helicopters flew closer to get a better view.

"Manning the rails" in traditional Navy fashion, Sailors in their working uniforms lined the flight deck sides, as Comfort made a steady final approach to the pier. After safely mooring, the crew streamed off to meet their waiting loved ones.

"It's great to be back in Baltimore," said Capt. James Ware, commanding officer of the medical treatment facility aboard Comfort. "In the past year the Comfort has conducted a pre-planned

humanitarian mission and now our disaster relief mission in Haiti. I'll always remember the dedication and teamwork demonstrated by our Comfort team members, and it was an honor to help the people of Haiti."

During the ship's mission, Comfort worked closely with Haiti's Ministry of Health and health care professionals from the U.S. Agency for International Development (USAID), international relief organizations and non-governmental organizations to secure follow-on care for patients in recovery.

U.S. Southern Command released Comfort from the mission Mar. 9 after determining that the need for Comfort's capabilities declined significantly during the final weeks of its mission. The ship made a brief stop in Norfolk, Va., March 13 to offload 500 members of the medi-

cal team and some equipment. Two hundred members of the team remained on board for the trip home and were warmly welcomed by members of the Baltimore community.

"We are very proud of the men and women who served aboard Comfort during this important mission to Haiti," said Shah Islam, a Baltimore resident and owner of a chain of local Dunkin Donuts stores. "We're honored to be here today to express Baltimore's pride and appreciation with free donuts and coffee for the families and crew to thank them all for their service to our country."

In addition to the nearly 1,000 Navy medical personnel who operate the hospital, Comfort also has 79 civil service mariners aboard who provided vital support to the medical team. The mariners maintained a reliable supply of





fresh water and electricity to Comfort's operating rooms and patient wards (the interruption of which could mean the difference between life and death), transported 45 patients to the ship's anchorage from shore and another 445 back to shore following their treatment, ensured the delivery of cargo ranging from blood supplies and medications to jet fuel and maintained the ship as a livable space for as many as 1,800 people.

"My crew of civil service mariners performed exceptionally well in this highly demanding situation," said Capt. Robert Holley, Comfort's civil service master. "They were presented with 101 different problems to troubleshoot and there was something new every day, yet each time we received a request for help, the answer was 'yes.'"

Having completed her mission to Haiti, Comfort will be kept pierside in Baltimore where a small crew of mariners and Navy medical personnel maintain the ship and hospital in a high state of readiness. When needed, Comfort can be ready to deploy again in five days. ✍

◀ **USNS Comfort makes her final approach to the Canton Pier in Baltimore, Md., Mar. 19, 2010.**

▲ **Family members post a sign welcoming the crew home.**

▼ **Baltimore school children gather to welcome the ship back home.**

(All Photos by Cmdr. Cappy Surette)





▲ NORFOLK (Mar. 13, 2010) The Military Sealist Command hospital ship USNS Comfort (T-AH 20) arrives at Naval Station Norfolk for a stop to offload some crewmembers and equipment following a seven-week deployment as part of Operation Unified Response. Comfort surgical teams performed more than 800 surgeries. (U.S. Navy photo by Mass Communication Specialist 3rd Class Ryan Steinhour/Released)
 ▼ NORFOLK (Mar. 13, 2010) Families prepare to welcome home their Sailors onboard Navy hospital ship, USNS Comfort, at the pier at Naval Base Norfolk. The ship was temporarily delayed due to pea soup fog, which was burned off by the sun about an hour later. (Photo by Cmdr. Cappy Surette)





▲ BALTIMORE (Mar. 19, 2010) The men and women of USNS Comfort “man the rails” in traditional Navy fashion by lining the sides of the flight deck in their working uniforms while the ship made its approach to the Canton pier. After safely mooring, the crew streamed off to meet their waiting loved ones.

▼ BALTIMORE (Mar. 19, 2010) Capt. James Ware, Commanding Officer of Comfort’s Medical Treatment Facility, addresses members of the media after the Hospital Ship moored in Baltimore.
(All photos by Cmdr. Cappy Surette)



U.S. NAVY PARTICIPATION



USS Carl Vinson (CVN 70)



USNS 1st Lt. Jack Lummus (T-AK 3011)



USS Ashland (LSD 48)

BARACOA
Baracoa
Cuba



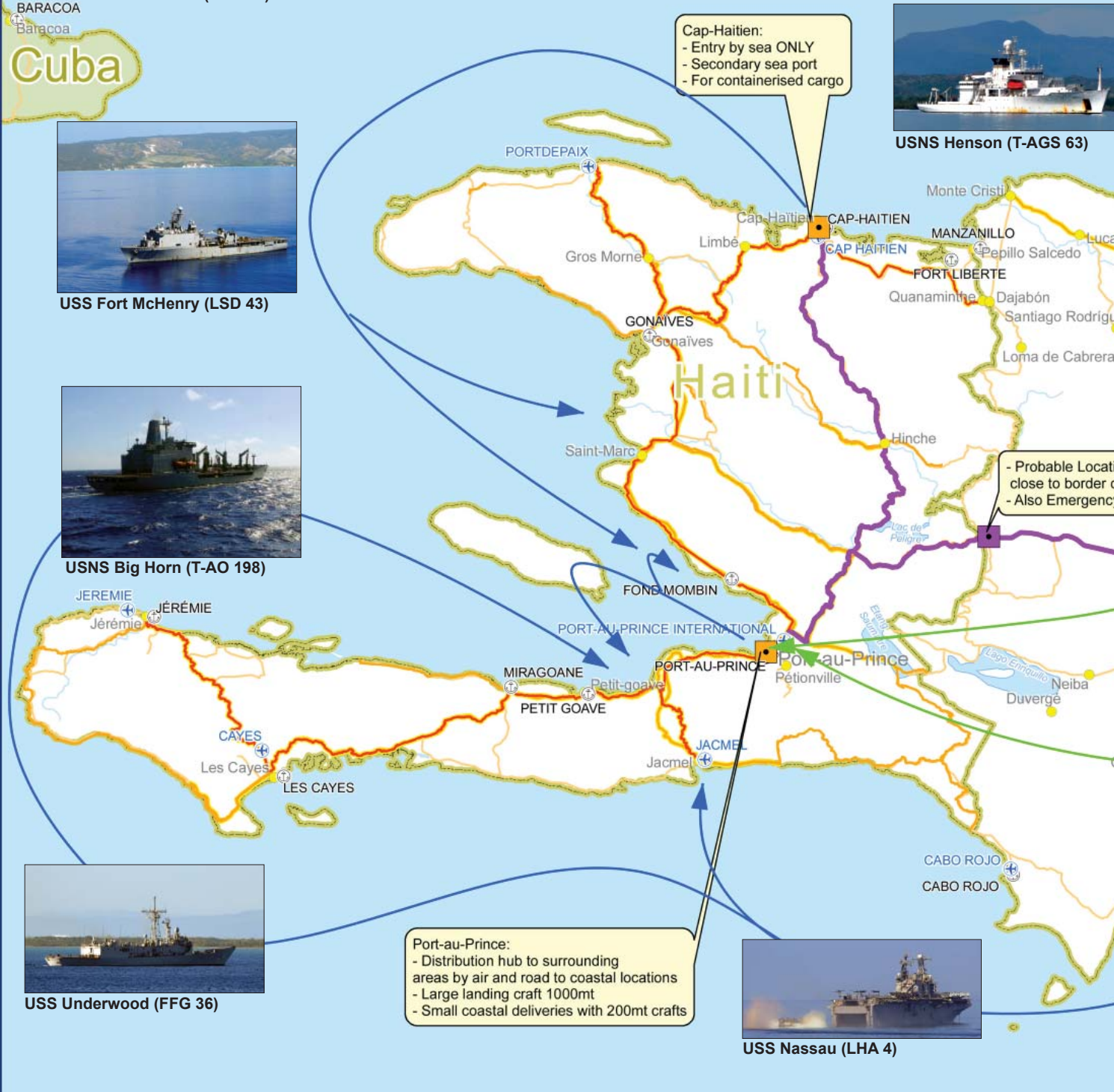
USS Fort McHenry (LSD 43)



USNS Big Horn (T-AO 198)



USNS Henson (T-AGS 63)



USS Underwood (FFG 36)



USS Nassau (LHA 4)

IN OPERATION UNIFIED RESPONSE



USS Carter Hall (LSD 50)



USNS Comfort (T-AH 20)



USNS Grasp (T-ARS 51)



USS Normandy (CG 60)



USS Bataan (LHD 5)



USNS Sacagawea (T-AKE 2)



USS Higgins (DDG 76)



WITH



CARIBBEAN SEA Doctors treat victims on hospital ship USNS Comfort (T-AH 20) while conducting humanitarian and disaster relief Unified Response after a 7.0 magnitude earthquake in Haiti Jan. 12. The Comfort and other ships are part of an effort to provide emergency medical aid.

A young man with dark skin and curly hair lies in a hospital bed, looking up with a hopeful expression. A medical professional, wearing a white coat and a silver watch, gently places their hand on the man's forehead. The background shows a clinical setting with medical equipment, including a red oxygen tank and a box of 'Cypress Allergies PFT' gloves.

A GLOBAL FORCE

A HUMAN TOUCH

victims aboard the Military Sealift Command (USNS Comfort) off the coast of Haiti. Comfort is providing disaster relief operations as part of Operation Unified Assistance. The earthquake caused severe damage to the U.S. Navy are leading a multi-national relief effort in Port au Prince, Haiti.

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A Brief History Of Navy Medicine In Haiti

On Jan. 12, 2010, a 7.0 magnitude earthquake hit the tiny nation of Haiti and shocked the global community. It is a sad fact that this country that clings to the western third of Hispaniola, and no bigger than the state of Maryland, has suffered more than its share of tragedy. Since declaring their independence from France on Jan. 1, 1804, the Haitian people have been ravaged by enough natural disasters, diseases, and political upheavals to fill an almost endless supply of Pandoran boxes.

Following the latest devastation to hit Haiti, the U.S. Navy, in partnership with other Federal departments, NGOs, and global agencies, has helped spearhead an international aid effort of historical proportions. It is an enormous and significant undertaking, but for the Navy and Marine Corps team it is not unprecedented.


It can be argued that the U.S. Navy's first humanitarian effort in Haiti began in 1915. Following a guerrilla (aka, Caco) uprising during the disastrously brief reign of President Vilbrun Guillaume Sam, the U.S. government ordered Navy and Marine forces into Haiti in July 1915

to protect financial interests. These forces would remain for the next 19 years in a period often referred to as the U.S. occupation of Haiti (1915-1934). It should be noted that in addition to quelling the political unrest, the Navy and Marines developed the Haitian Gendarmerie, or Haitian Constabulary, and established the National d'Hygiene Publique (aka, Public Health Service). Navy medical officers and hospital corpsmen serving with these two organizations oversaw sanitation and disease prevention by supervising the control of the mosquito population through drainage of the low lying areas, establishing quarantine facilities, and providing frontline medical care.

The U.S. team departed the island in 1934 but returned following several natural disasters that hit the island over the next 40 years. Following Hurricane Hazel in October 1954, helicopters from USS *Saipan* (CVL-48) dropped food, medicine, clothing, and other needed supplies to the stricken Haitians. In 1960, after the flooding of Lake Miragoane in southwest Haiti, Marine Assault Construction Battalion personnel spent 29 days on the island rebuild-

ing damaged infrastructure and constructing a new bridge. Disaster relief efforts were replicated in October 1963 following Hurricane Flora and in August 1964 following Hurricane Cleo. From October through December 1973, "Operation Navy Handclasp" saw the Navy Medical Department sailing to Columbia and Haiti aboard USS *Sanctuary* (AH-17) to treat several thousands in a 75-day long effort. And from 1994 through 1996, the U.S. Navy took part in "Operation Sea Signal" rescuing many Cuban and Haitian immigrants fleeing their countries in precarious makeshift rafts and seeking asylum in the United States. Throughout this effort, the Navy provided medical care to over 50,000 migrants at its Guantanamo Bay facilities. Surely, this is a foundation of goodwill that our Navy and Marine Corps team can proudly stand on as we continue to provide support and medical care to citizens of Haiti in 2010.

BIBLIOGRAPHY

1. The Hospital Corps Quarterly. Supplement to the Naval Medical Bulletin. 1917-1934.
2. Siegel, Adam. A Sampling of U.S. Naval Humanitarian Operations. Alexandria, VA: Center for Naval Analyses. 1990. 

(Originally Published in *The Hospital Corps Quarterly*, Winter 2010)

By Mr. André Sobocinski, Deputy Historian, BUMED, Washington, DC.

Navy Medicine 1909



Navy Hospital Corpsmen witness firsthand the devastation in Messina, Sicily following 7.2-magnitude earthquake in January 1909. Medical personnel from USS Celtic (AF-2), Culgoa (AF-3), and Scorpion assisted in the global relief efforts. (Official Navy photo)

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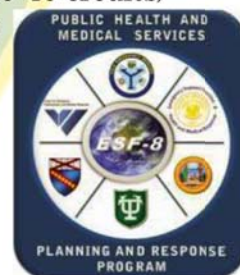
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